



## Cascade County Special Use Permit Application

Cascade County Public Works Department Planning Division  
121 4<sup>th</sup> St N, Suite 2H-2I  
Great Falls, MT 59401  
Phone: 406-454-6905 Fax: 406-454-6919

SD8-2019  
Permit No. ~~108-2019~~  
App. No.: 108-2019  
Applied Date: 7/1/2019

### General Information

A Special Use Permit (SUP) is required for uses in which conformance to additional standards will be required due to characteristics that are unique and special to the use. SUPs are to be issued for one specific use and are required for each tract of land. Legally issued SUPs shall expire one year after the date of approval if construction, or the use permitted, has not started. A one-time only six (6) month extension may be granted by the Zoning Board of Adjustment (ZBOA) upon request. SUP applications require a non-refundable application fee of four hundred and fifty dollars (\$450.00). Each SUP application shall be accompanied by an Location/Conformance (L/C) Permit application for changes in use and/or structures associated with the SUP application.

### Application Information

Property Owner Name: Orville and Arlene Skogen  
Applicant Name: SGS Montana, LLC DBA Skogen's Gun Supply  
Application Type: ☒ Change of Use ☐ New Structure(s)  
Special Use Call Out: light manufacturing & Assembly

### Understanding the Regulations

The proposed use must be specifically mentioned as a category in Uses Permitted Upon Issuance of a Special Use Permit within Section 7 of the Cascade County Zoning Regulations. Portions of the County Zoning Map and the Zoning Regulations are available at the Cascade County Website at <http://departments.cascadecountymt.gov/planning>.

### Steps of the Application Process

- (1) Schedule a Pre-Application meeting with planners to ensure the project will meet the standards for Special Use Permits as outlined within Section 7 of Cascade County's Zoning Regulations.
- (2) Complete, sign and submit a Special Use Permit application, Location/Conformance Permit application and a Use Statement Form, with the \$450.00 application fee to Planning Staff.
- (3) Diagrams, business plans, photographs and other documents may be requested as part of a complete application, depending on the applicant's proposal.
- (4) Planning Staff will notify interested agencies of the proposed project to request comments for the application.
- (5) Planning Staff will schedule a public hearing before the *Cascade County Zoning Board of Adjustment*;
- (6) Legal notice will be published twice in the Great Falls Tribune with at least six (6) days separating each publication.
- (7) Notice will be sent to all adjacent landowners via certified mail.
- (8) Planning Staff will present the application to the Zoning Board of Adjustment along with recommendations, based on findings of facts.
- (9) The *Zoning Board of Adjustment* will make a determination on the application; three (3) affirmative votes are needed to issue the permit.
- (10) Upon written notice from the Planning Staff, the applicant may begin the permitted special use.

- (11) Permits may be revoked or expire for the following reasons:
- a. The *Zoning Board of Adjustment* finds them in violation of the conditions of the permit or another regulation/ordinance.
  - b. Approval is valid for one particular use and shall expire one year after the date of approval, if construction or the use has not started. The Zoning Administrator may grant a one-time only 6 month extension on the Zoning Board of Adjustment Approval.
  - c. The Special Use Permit shall expire if the use ceases for six (6) months for any reason. Any future extension requests must be granted by the Zoning Board of Adjustment prior to the date of expiration.

**SUP General Impacts Criteria**

Explain how the proposed use contributes to, hinders, or otherwise impacts each of the criteria below. All criteria must be discussed. If criteria are not applicable, please explain why. Attach drawings, additional text, site plans, and any other documents that will assist staff and the board in reviewing the proposed use. The more information you can provide, the easier it is for staff and the *Zoning Board of Adjustment* to review the application.

- (1) The proposed development will not materially endanger the public health or safety.
- a. Traffic conditions in the vicinity, including the effect of additional traffic on streets and street intersections, and sight lines at street intersections and approaches:

Location is on Old Fort Shaw Road. County Gravel Road. Bulk of the traffic is agriculture based. +

Due to my location and my hours of operation are by appointment only, I do not anticipate any increase in traffic. +

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- b. Provision of services and utilities, including sewer, water, electrical, telecommunications, garbage collections, and fire protection:

Property is Rural Ag. I run this business out of my house. No need for additional services. +

I am 2 miles west of the Fort Shaw Fire Department in the case of a fire. +

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- c. Soil erosion, sedimentation, and stormwater run-off:

My business will have no impact on soil erosion, sedimentation or storm water run off. +

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- d. Protection of public, community, or private water supplies, including possible adverse effects on surface waters or ground water:

My business will have no impact on the ground water or private water supplies. +

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- (2) The proposed development is a public necessity, or will not substantially impact the value of adjoining property.
- a. The relationship of the proposed use and the character of development to surrounding uses and development, including possible conflicts between them and how these conflicts will be resolved.

My business does not include any development or impact the value of the adjoining property. +

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- b. Whether the proposed development is so necessary to the public health, safety, and general welfare of the community or County as to justify it regardless of its impact on the value of adjoining property.

My business does not include any development or impact the value of the adjoining property. +

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- (3) The proposed development will be in harmony with the area in which it is located.

- a. The relationship of the proposed use and the character of development to surrounding uses and development, including possible conflicts between them and how these conflicts will be resolved.

This is a home based business. I am not constructing any perminant buildings, and it will not impact my surrouding are +

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- b. Consistency with the municipal and joint land use plans incorporated by the Growth Policy.

I belive my application is consistant with the joint use land plans incorporated byt he growth policy. +

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### SUP Growth Policy Criteria

Explain how the proposed use will be consistent with each of the Cascade County Growth Policy goal objectives. All objectives must be discussed. If an objective is not applicable, please explain why. The more information you can provide, the easier it is for staff and the Zoning Board of Adjustment to review the application.

#### **Goal 1: Sustain and strengthen the economic well-being of Cascade County's citizens.**

##### **Objectives:**

- A. Stimulate the retention of existing businesses and expansion of existing businesses, new businesses, value-added businesses, wholesale and retail businesses, and industries including agriculture, mining, manufacturing/processing and forest products.

I am in the third year of my business. This new speical use permit addresses the expansion of my business model. +

It brings value to Cascade county through retail and wholesale business. I do not see where I have any impact on +

Agriculture or mining +

- B. Stabilize and diversify the county's tax base by encouraging the sustainable use of its natural resources.

My business is mostly retail with some special use assembly, which by ATF regulations is defined as manufacturing. I do not see where I am utilizing any natural resources besides expanding to do business with residents of Cascade County and our local law enforcement.

- C. Identify and pursue primary business development that complements existing business, which is compatible with communities, and utilizes available assets. Identify and pursue targeted business development opportunities to include, but not limited to, manufacturing/heavy industry, telecommunication, and youth/social services.

My business is the sales of sporting goods which includes Firearms. I am regulated through ATF. This application will accompany the change in my FFL from a 01 (Retail) to a 07 (allows me to manufacture, reload, gunsmith) firearms per ATF and all ITAR regulations. My customer base is residents of Cascade County and the surrounding area.

- D. Promote the development of cultural resources and tourism to broaden Cascade County's economic base.

I do carry some specific product lines that will generate business from residents from outside Cascade County. I do not see where I would impact tourism.

- E. Foster and stimulate well-planned entrepreneurship among the county's citizenry.

My business is a home based business that is expanding. My customer base is not only from Cascade County and the surrounding area, but I sell product all across the United States.

- F. Promote a strong local business environment. Encourage and strengthen business support mechanisms such as chamber of commerce, development organizations and business roundtable organizations.

My business is growing, but I do not see where my current model will have a significant impact on the local economy. I do network extensively with the local business and development organizations.

- G. Improve local trade capture for Cascade County businesses. Promote local shopping as well as well-planned businesses and new businesses.

My business is organically grown. I do sell product outside of area on my website, but the bulk of the products I sell and plan to assemble/manufacture will be utilized locally.

- H. Network with and support other economic development efforts in the region and statewide, in recognition of Cascade County's interdependence with other communities and to leverage available local resources.

I have no issue networking with local resources and promoting them, but I am not sure where my business would have a significant impact.

- I. Encourage the growth of the agricultural economy.

This business will have limited impact on our local Ag economy.



- J. Stimulate the growth of the economy by encouraging the use of alternative methods of energy production, including wind energy.

My business will have no impact on this.



**Goal 2: Protect and maintain Cascade County's rural character and the community's historic relationship with natural resource development.**

**Objectives:**

- A. Foster the continuance of agriculture and forestry in recognition of their economic contribution and the intrinsic natural beauty of grazing areas, farmlands and forests.

My business will have limited impact on Ag. I will and do promote good sportsman ship, youth hunting  
and our law enforcement.



- B. Preserve Cascade County's scenic beauty and conserve its forests, rangeland and streams, with their abundant wildlife and good fisheries.

My business sells quite a selection of sporting goods, firearms and optics that is used exclusively by  
those who utilize Montana's outdoors.



- C. Preserve Cascade County's open space setting by encouraging new development to locate near existing towns and rural settlements and by discouraging poorly designed, land subdivisions and commercial development.

My business will have no impact on this.



- D. Assure clean air, clean water, a healthful environment and good community appearance.

Any assembly/manufacturing will be by ATF and ITAR regulations. I will have minimal impact on the enviornment.



- E. Support the development of natural resources including but not limited to timber, mining, oil and gas production and renewable energy production.

I will have no impact on this.



- F. Continue to work with federal and state agencies to redevelop properties within Cascade County which are currently undergoing Superfund and Brownfields processes.

I will have no impact on this.



**Goal 3: Maintain agricultural economy.**

**Objectives:**

- A. Protect the most productive soil types.

This does not apply to my business.



- B. Continue to protect soils against erosion.

This does not apply to my business.



- C. Protect the floodplain from non-agricultural development.

This does not apply to my business.



- D. Support the development of value-added agricultural industry in Cascade County utilizing the products from the regional area.

This does not apply to my business.



#### **Goal 4: Retain the presence of the US Military in Cascade County**

##### **Objectives:**

- A. Encourage the federal congressional delegation to actively support maintaining the current mission status at a minimum.

This does not apply to my business.



- B. Promote the location of additional military missions in Cascade County.

This does not apply to my business.



- C. Encourage the reactivation of the runway at Malmstrom Air Force Base for fixed wing operations.

This does not apply to my business.



- D. Refer to the Joint Land Use Study for resolving conflicts and promoting mission compatible development.

This does not apply to my business.



#### **Goal 5: Preserve and enhance the rural, friendly and independent lifestyle currently enjoyed by Cascade County's citizens.**

##### **Objectives:**

- A. Maintain Cascade County's citizens independent lifestyle and minimize local governmental intervention, to the extent possible, consistent with the requirements of a continually evolving economy and constantly changing population.

This is a home based business that is growing and evolving to meet my customers needs.



I am not sure where I would apply to this.



- B. Preserve and promote Cascade County's rich cultural heritage, rooted in natural resource development and reflected in its numerous cultural/historic sites and archaeological areas.

This does not apply to my business.





- C. Promote fire prevention measures throughout the county, giving special emphasis to the extreme fire hazards present at the wildland-urban interface.

This does not apply to my business. +

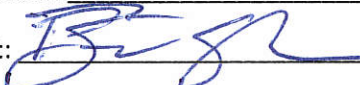
- D. Encourage the continued development of educational programs and facilities, recreational opportunities and spaces and health services for all county residents.

I network with many youth hunters, first time fire arm owners, local non profits and our law enforcement. +

I encourage education regarding the outdoors and responsible firearm safety. +

**ATTEST:** I hereby certify that the information given herein is true and correct to the best of my knowledge. There are no restrictions placed upon my property which would prohibit the issuance of this permit. If there are any restrictions, then this permit shall become null and void. I hereby grant permission to any Cascade County Zoning Official to enter my property to inspect for compliance with the County Zoning Regulations in relation to this application.

Printed Name of Applicant: SGS Montana, LLC DBA Skogen's Gun Supply

Signature of Applicant: 

Date: 7-1-19

Printed Name of Property Owner: Orville and Arlene Skogen

Signature of Property Owner: 

Date: 6-30-19



## Office Use Only

Fee: ☒ Application (\$450.00)

Payment Type: ☒ Check No.: 1015

☐ Cash

Date Application Received: 7/1/2019

Application Number: 108-2619

ZBOA Public Hearing Date: \_\_\_\_\_

☐ Completed L/C Application(s) ☒ Completed Use Statement

Date Application Approved: \_\_\_\_\_

Associated L/C Permit Number(s): \_\_\_\_\_

Approved Permit Number: \_\_\_\_\_

Approved by (staff): \_\_\_\_\_

### Review Items

#### SUP General Impacts Applicant Response Review

1.a.	<input checked="" type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient	2.a.	<input checked="" type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
1.b.	<input checked="" type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient	2.b.	<input checked="" type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
1.c.	<input checked="" type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient	3.a.	<input checked="" type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
1.d.	<input checked="" type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient	3.b.	<input checked="" type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient

#### SUP Growth Policy Criteria Applicant Response Review

Goal 1. A.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 1. B.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 1. C.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 1. D.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 1. E.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 1. F.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 1. G.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 1. H.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 1. I.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 1. J.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 2. A.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 2. B.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 2. C.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 2. D.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 2. E.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 2. F.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 3. A.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 3. B.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 3. C.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 3. D.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 4. A.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 4. B.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 4. C.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 4. D.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 5. A.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 5. B.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 5. C.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient
Goal 5. D.	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Sufficient



## Cascade County Use Statement Form

Cascade County Public Works Department Planning Division  
121 4<sup>th</sup> St N, Suite 2H-2I  
Great Falls, MT 59401  
Phone: 406-454-6905 Fax: 406-454-6919

Permit No: SOB-2019  
App. No.: 108-2019  
Applied Date: 7/1/2019

The Use Statement Form is required for all Special Use Permit applications and is designed to provide pertinent information about the proposed use. It is important that the use statement provides a complete understanding of your proposal. The use statement that you submit must address all the following items that apply to your proposal. Your use statement must be written in on this form or written in a legible manner on a separate sheet of paper and submitted with your Special Use Permit application in print or by email. If your responses are written on a separate sheet of paper, indicate the number of each response corresponding with the item numbers listed below. Where a definite answer cannot be provided for any of the items below, provide an estimate and indicate any uncertainty. Begin by indicating all relevant uses of the proposal below and proceed to address each item. The form will not be considered complete without a signed and dated submission by the landowner and/or applicant.

Use type (check all that apply): ☐ Residential ☒ Commercial ☐ Industrial

If the proposed use is residential only then only questions 1-6 are required. For uses that are commercial and/or industrial all questions must be addressed. If the item does not pertain to the proposed use, then indicate that the item does not apply.

**1. Nature of the use - what do you propose to do and how do you plan to do it? Describe in detail.**

SGS Montana, LLC is a small home based business that sells optics and firearms. I currently have a 01 FFL that allows me to retail and sell new and used firearms per ATF regulations. Due to the growth and customer demand, I am applying for a 07 FFL that will allow me to do the following per ATF and ITAR regulations:

1. Sell new and used Firearms, 2. Gunsmithing, 3. Manufacture/assembly of firearms, 4. sell ammunition I load.

At this time, I have no plans to cut steel on any lower receivers or firearms, just assemble pre made parts that I purchase. Per ATF and ITAR regulations and definition, this is manufacture of firearms.

**2. Access to the site:**

☒ Public Road ☐ Private Road Surface: ☐ Paved ☐ Gravel ☐ Dirt

Indicate the planned access points in the site plan. If a new approach will be required, contact either Montana Department of Transportation or County Road and Bridge Division.

**3. Describe any planned advertising or signage. Include the size, appearance, and placement.**

None. I run this out of my house. I have no sign-age. All business is by appointment only.

**4. Will existing buildings be used, or will new buildings be constructed (or both)? Indicate new and old buildings or structures on the required site plan.**

Existing, using my house.

5. Will any landscaping or fencing be developed? If so, describe the type of landscaping and/or fencing elements planned. Use reference to the site plan for clarity.

No landscaping or fencing will be utilized.

6. Does the proposed use require any other local, state, or federal permits or licensing? If so, indicate the permits and/or licenses and when they will be acquired. If the permit and/or license has already been acquired, provide the permit and/or license number.

Yes, this special use permit is required per ATF regulations for my 07 FFL application.

If the proposed use is residential only, you may stop here and sign at the end of the form.

7. Operational time limits:

Months (if seasonal): from \_\_\_\_\_ to \_\_\_\_\_

Days per week: \_\_\_\_\_

Hours: from \_\_\_\_\_ to \_\_\_\_\_

Total hours per day: By Appointment

Special activities: \_\_\_\_\_

Frequency: \_\_\_\_\_

Hours: from \_\_\_\_\_ to \_\_\_\_\_

Are these indoors or outdoors? \_\_\_\_\_

8. Expected number of customers or visitors:

Average per day: TBD

Maximum per day: \_\_\_\_\_

Hours (when they will be there): from \_\_\_\_\_ to \_\_\_\_\_

9. Number of employees:

Current: 0

Future: \_\_\_\_\_

Hours they work: from \_\_\_\_\_ to \_\_\_\_\_

Do any live on-site as a caretaker? \_\_\_\_\_

10. Service and delivery vehicles:

Number: 0

Type: \_\_\_\_\_

Frequency: \_\_\_\_\_

**11. Number of parking spaces for employees, customers, and service/delivery vehicles:**

I have a large driveway. I have room for 4-6 vehicles if needed.

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**12. Are any goods to be sold on-site? If so, are these goods grown or produced on-site or at some other location? Explain.**

I sell firearms, optics and other sporting goods.

I will not make any of these products. All products or components are produced elsewhere.

I will assemble components into products, which per ATF regulation is manufacture.

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**13. What equipment is used? If available, provide pictures or a brochure.**

No equipment is used.

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**14. What supplies or materials are used and how are they stored?**

All product is stored in a safe.

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**15. Does the use produce any of the following by-products which may be considered a nuisance?**

☐ Noise      ☐ Glare      ☐ Dust      ☐ Odor      ☐ Smoke

☐ Other \_\_\_\_\_

If so, explain how this will be reduced or eliminated?

I will produce none of the above.

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**16. Does the proposed use involve livestock animals? If so, provide the types of livestock and the approximate number of each type of animal involved.**

My proposal will not involve any livestock.

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17. Will any solid or liquid wastes be produced (other than septic system waste)? If so, list (for each) : (1) the type(s) of waste; (2) the estimated volume of waste; (3) how and where it will be stored; (4) how it will be hauled; (5) where it will be disposed at and how often.

No waste will be produced.

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18. Estimated volume of water to be used (gallons per day) and the source of water:

None besides personal use.

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19. Explain which buildings or what portion of buildings will be used in the operation. Use reference to the indicated structures or buildings in the site plan for clarity.

I currently run this business out of my house.

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20. Will any buildings or portions of buildings be rented or leased? ☐ Yes ☒ No

21. Will any outdoor lighting or an outdoor sound amplification system be used? If so, describe how and when they will be used.

No outdoor lighting or outdoor sound amplification will be used.

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22. Is there any other information that will provide a clear understanding of the project or operation?

There is not.

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**ATTEST:** I hereby certify that the information given herein is true and correct to the best of my knowledge and acknowledge that the information provided herein may be binding upon issuance of an approved Special Use Permit with conditions.

Printed Name of Applicant: SGS Montana, LLC DBA Skogen's Gun Supply

Signature of Applicant:  Date: 7-1-19

Printed Name of Owner: Orville and Arlene Skogen

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_





## Cascade County Location/Conformance Permit Application

Cascade County Public Works Department Planning Division  
121 4<sup>th</sup> St N, Suite 2H-21  
Great Falls, MT 59401  
Phone: 406-454-6905 Fax: 406-454-6919

Permit No: \_\_\_\_\_  
App. No.: ~~108-2019~~ 104-2019  
Applied Date: 7/1/2019

### General Information

A Location/Conformance (L/C) permit is required: (1) for all changes of land use and commercial activities within Cascade County jurisdiction and (2) prior to the construction of all buildings and structures two-hundred (200) square feet or larger on all lands within Cascade County jurisdiction. L/C permits are not required for "site preparation," as defined in the Cascade County Zoning Regulations (CCZR). L/C permits are to be issued for one use and are required for each tract of land. Legally issued L/C permits shall expire one year after the date of approval if construction or the use permitted has not started. A one-time only twelve (12) month extension may be granted by the Zoning Administrator upon request. L/C permit applications require a non-refundable application fee of fifty dollars (\$50.00) unless non-site preparation work started prior to the issuance of an L/C Permit; post-work projects require a non-refundable application fee of two-hundred dollars (\$200.00).

### Project Information

Project Address	207 Old Fort Shaw Road, Fort Shaw MT 59443							
Estimated Project Value (\$)								
Legal Description	Township	20N	Range	2W	Section	10	COS No.	4245
	Subdivision							
	Parcel No.	4589400			Geocode	02 3011 10 2 01 01 0000		
	Total parcel area	119.07			Unit:	<input checked="" type="checkbox"/> Acres <input type="checkbox"/> Square Feet		
Property Owner	Name	Orville and Arlene Skogen						
	Address	PO Box 158, Fort Shaw MT 59443						
	Phone Number	406-264-5298						
Applicant (Contractor, Engineer, etc.)	Name	SGS Montana, LLC DBA Skogen's Gun Supply						
	Address	PO Box 123, Fort Shaw MT 59443						
	Phone Number							
Application Type	<input checked="" type="checkbox"/> Change of use <input type="checkbox"/> New build/alteration							
	Previous use:	FFL Retail, Dealers, Repairs						
Use type	<input type="checkbox"/> Single-family Residential <input type="checkbox"/> Multi-family Residential <input type="checkbox"/> Public/NGO							
	<input type="checkbox"/> Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Sign							
	<input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Registered Premise							
	<input type="checkbox"/> Garage/Shop/Barn <input checked="" type="checkbox"/> Home Occupation <input type="checkbox"/> Other:							
Structures	Number of existing structures				Total existing structure area (sq. ft.)			
	Number of proposed structures				Total proposed structure area (sq. ft.)			
	Total area of alteration (sq. ft.)							
Water/Waste	Type of sewage disposal		septic		Source of water supply		well	

Project Description:

Please see special use Application.

**Submission Checklist**

Location/Conformance Permit applications shall be submitted to the Cascade County Planning Office for review. The following checklist must be completed and signed by the applicant before the application can be reviewed. Where applicable, all required permits/forms must be attached to the application.

- ☐ A site plan prepared at a scale not less than one inch equals one-hundred feet (1" = 100') containing, where applicable, the following minimum information:
  - ☐ Name and address of applicant.
  - ☐ Legal description and boundary lines of property being considered for review.
  - ☐ Existing and proposed land use upon the site.
  - ☐ Names of owners and existing land use on adjacent property.
  - ☐ Location, size, dimensions and uses of existing and proposed buildings and improvements.
  - ☐ Location and description of existing and proposed utilities.
  - ☐ Location and dimensions of curb cuts and access points.
  - ☐ Location, size, dimensions and number of off-street parking spaces, including on-site vehicular driveways and type of surface improvements.
  - ☐ Location and type of existing and proposed landscaping or buffering.
  - ☐ Location, type and height of existing and proposed fencing and screening.
  - ☐ Location, type and height of sight-obscuring improvement surrounding areas of storage for raw materials, finished products, machinery and equipment.
- ☐ Floodplain permit (attached). This is required if the project is in a regulated floodplain.
- ☐ Approach permit (attached). This is required if the proposed approach is from a county or state road.
- ☐ Addressing application (attached). This is required if the subject property needs a structure addressed.
- ☐ Septic permit (attached). This is required for projects installing a septic system, re-utilizing a pre-existing septic system, or increasing the capacity of a pre-existing septic system on the subject property.
- ☒ General Permit for Storm Water Discharge Associated with Construction Activity (attached). This is required for projects that will disturb an acre or more of land.

**Attestation Statement and Signature**

I hereby certify that the information given herein is true and correct to the best of my knowledge. There are no restrictions placed upon my property which would prohibit the issuance of this permit. If there are any restrictions, then this permit shall become null and void. I hereby grant permission to any Cascade County Zoning Official to enter my property to inspect for compliance with the County Zoning Regulations in relation to this application.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_



## Office Use Only

Fee(s): ☐ Pre-work (\$50.00) ☐ Post-work (\$200.00) ☐ Addressing (\$25.00)  
 Payment Type: ☐ Check No.: \_\_\_\_\_ ☐ Cash  
 Date Application Received: \_\_\_\_\_ Application Number: \_\_\_\_\_  
 Date Application Approved: \_\_\_\_\_ Approved by (staff): \_\_\_\_\_  
 Approved Permit Number: \_\_\_\_\_ Associated SUP Number: \_\_\_\_\_

### Review Items

Zoning District: \_\_\_\_\_  
 Restrictions/Covenants: ☐ Yes ☐ No Type: \_\_\_\_\_  
 Physical/Legal Access: ☐ Yes ☐ No  
 Setback Requirements (ft): Front: \_\_\_\_\_ Rear: \_\_\_\_\_ Side: \_\_\_\_\_  
 Parking Requirements: Existing: \_\_\_\_\_ Required: \_\_\_\_\_ Proposed: \_\_\_\_\_  
 Landscaping Requirements: Frontage Option: \_\_\_\_\_ Buffer Option: \_\_\_\_\_  
     Administrative Relief Requested: ☐ Yes ☐ No  
     Administrative Relief Granted: ☐ Yes ☐ No  
 Height Requirements: ☐ Airport Zone: \_\_\_\_\_ ☐ Military Overlay District: \_\_\_\_\_  
 Floodplain: ☐ Yes ☐ No  
     Permit Attached: ☐ Yes ☐ No  
 Variance Request: ☐ Yes ☐ No  
     Variance Approval Attached: ☐ Yes ☐ No  
 Approach Permit: ☐ Yes ☐ No  
     Approach Permit Attached: ☐ Yes ☐ No  
 City-County Health Department Approval: ☐ Yes ☐ No  
     Permit Attached: ☐ Yes ☐ No  
 Addressing Approval: ☐ Yes ☐ No  
     Addressing Approval Attached: ☐ Yes ☐ No

### Data Collection

Permit Category	<input type="checkbox"/> Residential	<input type="checkbox"/> Public/NGO	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial
Permit Type	<input type="checkbox"/> Dwelling Unit(s) <input type="checkbox"/> Utilities <input type="checkbox"/> Manufacturing <input type="checkbox"/> Construction <input type="checkbox"/> Information <input type="checkbox"/> Retail Trade <input type="checkbox"/> Public Admin. <input type="checkbox"/> Other Services	<input type="checkbox"/> Administrative, Waste Management and Remediation Services <input type="checkbox"/> Transportation and Warehousing <input type="checkbox"/> Mining, Quarrying, O & G <input type="checkbox"/> Finance and Insurance <input type="checkbox"/> Real Estate and Rental/Leasing <input type="checkbox"/> Prof., Scientific, Tech. Services <input type="checkbox"/> Health Care and Social Assistance	<input type="checkbox"/> Agriculture, Forestry, Hunting or Fishing <input type="checkbox"/> Arts, Entertainment, Recreation <input type="checkbox"/> Accommodation and Food Services <input type="checkbox"/> Educational Services <input type="checkbox"/> Wholesale Trade	



Location  
207 Old Fort Shaw Road.

